MINUTES OF THE MEETING

**HEALTH SERVICES COUNCIL** 

DATE: 31 October 2006

**TIME: 2:30 PM** 

**LOCATION: Health Policy Forum** 

ATTENDANCE:

Council: Present: Victoria Almeida, Esq., (Vica Chair), Edward F.

Almon, Raymond C. Coia, Esq., John W. Flynn, Catherine E. Graziano,

R.N., PhD, John Keimig, Robert S.L. Kinder, M.D., Amy Lapierre,

Denise Panichas, Robert J. Quigley, DC, (Chair), Larry Ross,

**Reverend David Shire (Secretary)** 

Not Present: Wallace Gernt, Maria R. Gil, Robert Ricci, Robert

Whiteside

Excused Absence: Joseph V. Centofanti, M.D., Rosemary Booth

Gallogly, Robert Bernstein, John Keimig

Staff: Valentina Adamova, Michael K. Dexter, Joseph G. Miller, Esq.,

Don Williams, Jennifer Morgan (Intern)

Public: (Attached)

1. Call to Order, Approval of Minutes, Conflict of Interest Forms and Time Extension for the Minutes Availability

The meeting was called to order at 2:40 PM. The Chairman noted that conflict of interest forms are available to any member who may have a conflict. The minutes of the 26 September 2006 meeting of the Health Services Council were approved as submitted. The Chairman requested a motion for the extension of time for the availability of minutes pursuant to the Open Meetings Act. A motion was made, seconded and passed by a vote of twelve in favor and none opposed (12-0) that the availability of the minutes for this meeting be extended beyond the time frame provided for under the Open Meetings Act. Those members voting in favor were: Almeida, Almon, Coia, Flynn, Graziano, Keimig, Kinder, Lapierre, Panichas, Quigley, Ross, Shire.

## 2. General Order of Business

The first item on the agenda was Report of the Health Services Council on the application of The Miriam Hospital for a Certificate of Need to acquire and operate a da Vinci S Surgical System. Staff read into the record portions of the cost impact statement from Blue Cross & Blue Shield. Staff summarized committee deliberations on this matter.

A motion was made, seconded and passed by a vote of twelve in favor, none opposed (12-0) to recommend that the application be approved. Those members voting in favor of the motion were: Almeida, Almon, Coia, Flynn, Graziano, Keimig, Kinder, Lapierre, Panichas, Quigley, Ross, Shire.

The next item on the agenda was the Report of the Health Services Council on the application of Newport Hospital for a Certificate of Need to establish a Diagnostic Imaging Center in Portsmouth to provide radiology services, including Digital Mammography, Ultrasound, CT and MRI services. Staff read into the record portions of the cost impact statement from Blue Cross & Blue Shield. Staff noted that a letter from XRA Medical Imaging was included in the mailing. Staff summarized committee deliberations on this matter and noted that the committee found the application to be neither needed nor affordable and recommended that the application be denied.

Arthur Sampson, President of Newport Hospital provided comments and noted that the Hospital's imaging services were presently utilized at capacity; that a denial of this application would result in serious adverse consequences to the patients in the service area of the Hospital; that PACS linking was not practical; that the Hospital provides access to imaging to those in need through its charity care

policy.

Rachel Schwartz, of Lifespan Corporation, presented an updated statewide projected needs analysis for MRI and CT services showing a range for 2008 of a projected surplus of 1.3 MRI units to a projected deficit of 3.9 MRI units and showing a range for 2008 of a projected deficit of 1.3 CT units to a projected deficit of 22.2 CT units. The Lifespan update noted that these projections differed from the projections developed by staff that showed projected surpluses of 8.5 to 11.6 MRI units and 6.0 CT units for 2008.

Ted Kutcher, MD, Chief of Radiology at Newport Hospital, provided oral comments and noted: Newport Hospital's imaging services were utilized at capacity; the superiority of the proposed MRI and CT units; the need for the MRI and CT for purposes of continuity of care; the need for a multi-slice CT unit for the purposes of quality; the efficiency of the speed of multi-slice CT units versus single slice CT units; the need for breast MRI for biopsies; the immediate access to film images; the quality of the image with respect to certain anatomies; and a rebuttal to the claims of the XRA letter.

Edward Quinlan, President of the Hospital Association of Rhode Island, provided oral comments and noted that the hospital delivery system is fragile; that hospitals provide care 24 hours a day and seven days a week; that there should be a level playing field with hospitals and outpatient providers.

Jerrold Robins, MD, provided oral comments on the Newport Hospital application. Dr. Robbins noted the waiting time for an appointment for a screening mammography of 60-80 days at Newport Hospital and 5-16 days for an ultrasound at Newport Hospital; the credentials of the radiologists at XRA; that a single slice CT could accommodate 99% of what a multi-slice CT could perform; that through integration with Newport Hospital, XRA could provide sufficient continuity of care using the PACS system; that scans need to be repeated in emergencies; that an XRA radiologist is available 24 hours a day and seven days a week.

There was considerable questioning of witnesses by Council members as well as dialogue and comments by the Council members. One member noted that there were three MRI units serving the area and that the proposed MRI would not be operational until FY 2009. Another member noted that Newport Hospital was the only facility in the state utilized at capacity and that the City of Newport has a significant poor population. Another member noted that there should be more collaboration between providers and approving the application would add unnecessary expenses that Rhode Island could not afford.

Ms. Almeida, Vice Chair, noted that the information and data presented at this meeting was significant and she noted that she would be voting in favor of the application.

A motion was made, seconded and passed by a vote of seven in favor, four opposed and one abstention (7-4-1) to recommend that the application be approved with appropriate conditions of approval. Those members voting in favor of the motion were: Almeida, Almon, Coia, Keimig, Kinder, Panichas, Shire. Those opposed were: Flynn, Graziano, Lapierre, Ross. Quigley abstained. Staff read into the record the proposed conditions of approval. The stated rational for a motion to approve the project for which the Committee recommended denial was that there was new additional information provided at the full Council meeting.

The next items on the agenda were DRAFT proposed Rules and Regulations for Determination of Need for New Health Care Equipment and New Institutional Health Services (R23-15-CON), DRAFT proposed Rules and Regulations for Licensing Hospice Care (R23-17-HPC), and DRAFT proposed Rules and Regulations Pertaining to Immunization, Testing, and Health Screening for Health Care Workers (R23-17-HCW). The Council decided to postpone review of these until a later date to give members an opportunity to review the documents. It was noted that a special meeting of the Health Services Council would be held for that purpose.

## 3. Adjournment

There	being	no	further	business	the	meeting	was	adjourned	at	4:40
PM.										

Respectfully submitted,

Valentina D. Adamova